## 5-19-00

## PART B - FEE(S) TRANSMITTAL

( MAY 1 7	w/	r T	or	<u>Fax</u>	P.O. Box 1450 Alexandria, Virg (571)-273-2885	inia 22313-1450	should be completed where t correspondence address as arate "FEE ADDRESS" for
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APPLICATION NO.	FILING DATE	FIRST NAMED INVE		INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/014,774 TITLE OF INVENTION: P	10/29/2001 ROTEIN SPECIFIC FOR C	ARDIAC AND SKI	Alessandra			2427/1F509-US1	9922
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	મ⊕- પ્ર	91400 \$ 700			\$300	\$1700 \$100	06/15/2006
EXAMINER		ART UNIT		CI	LASS-SUBCLASS		
FRONDA, CHRISTIAN L		1652		-	435-183000	•	
1. Change of correspondenc CFR 1.363).  Change of correspon- Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print	or type) Rec. 10	0/29/01 R/F:	012401/0176
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be a 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	lata will appe a substitute	ear on t for filin	the patent. If an assign g an assignment.	cook identified door of the control	loginal was been filed for
(A) NAME OF ASSIGN	FF		(B) RESIDE	NCE: (	CITY and STATE OF	ZOLÚNTRY)	700.00 OP 300.00 OP
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Please check the appropriate	e assignee category or catego	ories (will not be pri	nted on the pa	atent):	☐ Individua X X C	orporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed:  XX Issue Fee  XX Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed. \$1000.00  Payment by credit card. Form PTO-2038 is attached.  ★ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-0100 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated above	e)					

Authorized Signature 52,392 Paul M. Zagar, MD Registration No. Typed or printed name This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

XX a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.